Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate lev	el produced by rate revision effective	12/1/2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Manufactured Homeowner Line of Insurance Does filing only apply to certain territory (to	RECEINAUG X 7 STATE OF 1 STATE OF 1 DEPARTMENT OF 1 \$1,081,004 erritories) or certain classes? If so, specify	2009 LLINOIS FINSURANCE FINSURANCE +8.04%
Brief description of filing. (If filing follows increasing Flat Base Rate for Owner Byling the Single-Sectional and Doublewide programmer *Adjusted to reflect all prior rate changes. **Change in Company's premium level wh	ne and Seasonal Byline programs. We are rams to the Owner Package program. ich will result from application of new rate American	e also combining Flate Base Rates for

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	12/1/2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>
 Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril 	AUG X 4 200 STATE OF ILLII DEPARTMENT OF IN SPRINGFIE	09
Crop Hail Other <u>Manufactured Homeowner</u> Line of Insurance	\$516,621	+15.04%
Brief description of filing. (If filing follow increasing Flat Base Rate for Owner By Doublewide) and Rental programs. We	(territories) or certain classes? If so, specify vs rates of an advisory organization, speciline, Seasonal Byline, Owner Package (Sin are also increasing the Unprotected Facto 2. Please refer to the Cover Letter for more	ify organization): In this filing we are gle-Sectional, Doublewide and Senior r for Owner Package Doublewide and
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	s. hich will result from application of new rates	S.
		ern Select Insurance Company Name of Company ra Harty/Filing Analyst Official – Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective 12-1-09

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	<u>corruge</u>		
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
•	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety	-	
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail Other Businessowners	255,877	-12.2
15.	Line of Insurance	255,877	-12.2
	Ente of module		
Does	filing only apply to certain territory (t	erritories) or certain classes? If s	o, specify:
	lies to all Businessowners sublines,		
com	pany independent Restaurant Progr	ram (FRP)	
	description of filing. (If filing follows		
	se Company LCM. Revised and ne		
	ors for BPP based on Bldg Age and		
and	Bldg Age factors for bldgs. Add ne	w company Liability factors ba	sed on premium basis.
	djusted to reflect all prior rate change		of marry mates
** C	hange in Company's premium level w	men will result from application	of new rates.
		Continental Weste	ern Insurance Company
		Name	of Company
		Vio	ki Jacobs
			cial - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective <u>12-1-09</u>

		(1)	(2) Annual Premium	(3) Percent
	<u>(</u>	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobi	le Liability		
	Private P	assenger		
	Commerc	cial		
2.	Automobi	le Physical Damage		
	Private P	•		
	Commerc			
3.	-	Other Than Auto		
4.	Burglary a	and Theft		
5.	Glass			
6.	Fidelity			
7.	Surety			
8.		Machinery		
9.	Fire			
10.	Extended	_		
11.	Inland Ma			
12.	Homeown			
13.		al Multi-Peril		
14.	Crop Hail			
15.	Other _	Businessowners	231,815	-13.9%
		Line of Insurance		
Does	filing only a	pply to certain territory (territories) or certain classes? If nt Program sublines, territorio	so, specify:
тър	iles to an D	usinesso where restaura	it i i ogi um oubmico, territori	,
Revi	se Compan pany Rest l	y Restaurant Program Program Class Factors.	s rates of an advisory Organizat LCM. Revised and new compa New and revised rating factor	any exception pages. Revise
Rest	aurant Pro	gram.		
		eflect all prior rate change impany's premium level v	es. hich will result from application	of new rates.
				tern Insurance Company
			Name	e of Company
				cki Jacobs
			Off	ficial - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	ite level produced by rate revision
effective 01/01/2010	

-	(1)	(2) Annual Premium	(3) Percent
-	Coverage -	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private	Tolding (IIIII)	
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
1 .	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
€.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	· · · · · · · · · · · · · · · · · · ·	
14.	Crop Hail		
15.	Other BUSINESSOWNERS	384109	-6.07
	Life of Insurance		
9	5 66		
	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: All Busin	nessowners	**************************************
	Drief description of films (16.6)	ling follows rates of an a	duioon
	Brief description of filing. (If fi Organization, specify	ling follows rates of an a	avisory
	organization):	Filing to adopt current	ISO, revise LCM and update
	Businessowners rates/rules to Divis		
	businessowners rates/rules to bivis	son to and matericultent to	Y
	*Adjusted to reflect all prior ra	te changes	
	**Change in Company's prem		It from application of new
	rates.		- F
		Discover Property	& Casualty Insurance Company
		N1-	

Name of Company

Mark Holmes - Property Division

Official - Title

SUMMARY SHEET

Change	in	Company's	premium	or	rate	level	produced	bv	rate	revision
effecti	ve	October	1. 2009)			•	- 3		

	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -) **
Automobile Liability		
Private Passenger		
Commercial		
Automobile Physical Damage	•	
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft	4	
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Worker's Compensation		
Other Farm	\$ 301,315	7.50%
Line of Insurance	<u> </u>	7.50%
Dine of Insulance		
oes filing only apply to certain	territory (territories)	or certain classes
f so, specify: No. Applies to		
101 11991105 00		
		•
rief description of filing. (If	filing follows rates of	an advisory
rganization, specify organization		
. , , , , , , , , , , , , , , , , , , ,		

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will
result from application of new rates.

Madison Mutual Insurance Company
Name of Company

RECEIVED

AUG 3 1 2009

Ed Sprehe - Underwriting Manager
Official - Title

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

ILLINOIS SUMMARY SHEET

FORM RF-3

LOB: _	Commercial Property	
Change in Company's premium or rate level	produced by rate revision effective	01/01/2010
		•
(1)	(2)	(3)
_	Annual Premium	Percent
<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
7. Surety 8. Boiler and Machinery		
9. Fire	1,208,746	-11.8%
). Extended Coverage	864,471	24.5%
Inland Marine	16,757	-3.5%
2. Homeowners		-5.576
z. nomeowners 3. Commercial Multi-Peril		
_		
4. Crop Hail 5. Workers Compensation		
	29,068	122.1%
6. Other Earthquake Line of Insurance	29,000	122.170
oes filing only apply to certain territory (territori	es) or certain classes? If so, specify: N	/A
rief description of filing. (If filing follows rates o	f an advisory organization, ansaif; area	nization):
doption of ISO's loss costs and rules with n		nization).
doption of 150 s loss costs and rules with h	ew loss cost multipliers.	
* Adjusted to reflect all prior rate changes.		
** Change in Company's premium level which	will result from application of new rates	
Change in Company's premium level which	an result from application of new fates.	
	Universal Underwriters In	surance Company
	Name of Com	ipariy
_	Gabriel Coon - Actua	
_	Official - Ti	tle

-Revised Date -

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

Volume (Illinois) *	_ Change (+or-) **
	- Onlango (*or /
PEA	
NEC	EIVED
Auc	1000
700]	L <u>2 2009</u>
STATE OF	E 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
DEPARTMENT	OF INSURANCE
SPRING	GEIELD
	
	
\$132,948	-14%
<u> </u>	
in territory (territories) or	certain
	ith Cook County territory factor decr
iling follows rates of an ad	dvisory
	
xperience modification factor,	and deductible factors.
to changes	<u> </u>
	It from application of nev
idili level willeri will resul	t nom application of her
	actor changes are part of this filing wincreasing by 2.5%.